GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:1065
ANSWERED ON:05.03.2008
ALLOCATION OF FUNDS FOR VECTOR BORNE DISEASES
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the funds allocated to the State Governments for eradication of Malaria, Chikungunya, Dengue and Viral fever during the last three years, State-wise, year-wise;

(b) whether UN or any other foreign agency has granted funds for eradication of these diseases in the country;

(c) if so, the details thereof; and

(d) the effective steps taken by the Government to check the aforesaid diseases in the country?

Answer

THE MINISTER OF STATE FOR HEALTH & FAMILY WELFARE (SMT. PANABAKA LAKSHMI)

(a) Under National Vector Borne Disease Control Programme, Cash & Kind assistance is provided to the States for prevention and control of vector borne diseases. The consolidated statement since 2004-05 is as below:

Year	Allocation		Releases	
	Cash	Kind	Cash	Kind
2004-05	50.01	190.50	45.34	148.63
2005-06	56.85	265.72	82.67	161.25
2006-07	107.11	241.12	111.48	177.96
2007-08#	137.39	223.69	90.72	166.22

#Releases upto January 2008

The funds allocated to the State Governments in last three years, state-wise and year-wise are annexed

(b)&(c) For prevention and control of malaria, the external assistance has been received from Global Fund for AIDS, Tuberculosis and Malaria (GFATM) to the tune of US$ 63 million. This GFATM assisted Intensified Malaria Control Project (IMCP) is being implemented in North-Eastern States and in some districts of West Bengal, Jharkhand and Orissa. Government of India is also in the process of negotiating with the World Bank for a new project of 200 million US$ for Malaria Control and Elimination of Kala-azar.

(d) Government of India is taking effective steps to check the spread of these diseases and the following strategy is being implemented in the country:

Disease Management
Early case detection and complete treatment.

Strengthening of referral Services

Epidemic preparedness and rapid response

Integrated Vector Management
Indoor residual spraying in selected high risk areas.

Use of insecticide treated bednets

Use of larvivorous fish

Anti larval measures in urban areas including biolarvicides.

Supporting Intervention
Behaviour change communications

Public private partnership & inter-sectoral convergence

Human resource development through capacity building

Operational Research including studies on drug resistance and insecticide susceptibility.

Monitoring and evaluation through periodic reviews field visits and web based Management information system.

In addition to the above, Government has taken following initiatives for prevention and control of Japanese Encephalitis:

Ã˜ Strengthening of AES/JE surveillance through 50 sentinel sites and 12 Apex Referral Laboratories.

Ã˜ Standard Guidelines for AES/JE surveillance circulated

Ã˜ "Vector Borne Diseases Control Surveillance Unit" set up at BRD Medical College, Gorakhpur, UPÃ˜ Sub office, ROH &FW, Lucknow set up in Gorakhpur

Ã˜ JE vaccination in age group 1-15 years started in 2006 in 11 districts in 4 states (Assam, Karnataka, Uttar Pradesh, West Bengal). In 2007- Expanded to 28 districts in 10 states (Assam, Karnataka, Uttar Pradesh, West Bengal and Haryana, Bihar, Andhra Pradesh, Tamil Nadu, Maharashtra, Kerala).

Ã˜ Training of Microbiologists and Technicians of sentinel centres have been conducted.

Ã˜ Training courses for Clinicians and Nurses for Uttar Pradesh & Assam States conducted to improve the skills in JE case management.

Ã˜ Constitutions of Rapid Response Teams.

Similarly for prevention and control of Dengue/Chikungunya, following additional initiatives have been taken by Government :

Ã˜ Long term action plan for early case detection, disease management, vector surveillance, use of adulticides and larvicides were circulated to states for prevention and control activities

Ã˜ Guidelines on clinical management of Dengue/DHF cases sent to the states for wider circulation.

Ã˜ Identified 13 Apex Referral Laboratories for advanced diagnosis and regular surveillance of Dengue and Chikungunya cases.

Ã˜ Identified 110 sentinel surveillance hospitals for proactive surveillance for Dengue and Chikungunya.

Ã˜ IgM − Mc ELISA test kits for detection of Dengue/Chikungunya supplied to Apex Referral Laboratories and Sentinel Surveillance hospitals.

Ã˜ Contingency grant released to meet the operational cost of the Sentinel Surveillance hospitals and Apex Referral Laboratories.

Ã˜ Intensified IEC/BCC activities.

Ã˜ Supply of additional logistics like larvicides and adulticides in affected states.